

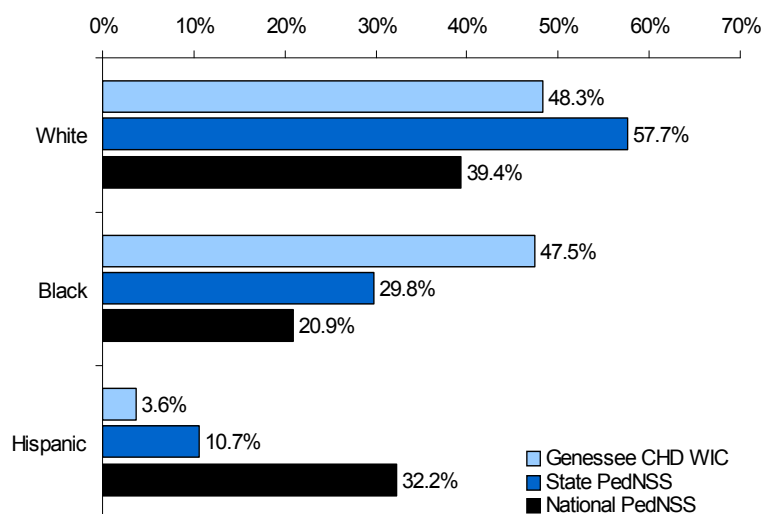
## 2003 WIC Local Agency Pediatric Nutrition Surveillance System (PedNSS) Report

The goal of Michigan WIC is to improve the health outcome of low income nutritionally at-risk women and children by providing supplemental nutritious foods, offering nutrition education/counseling, breastfeeding support, and referral to other health and social services. This report is developed to provide specific local information regarding the health and nutritional status of WIC participants. In order to provide local statistics stratified by age and race/ethnicity, three-year averages were calculated for each health indicator. Consequently, point estimates represent the incidence or prevalence of an indicator between the years 2001 and 2003. Trends were constructed using rolling averages and cover the period between 1998 and 2003.

According to the U.S. Census 2003 American Community Survey, an estimated 26.7% of the 16,400 (90%CI: 15,456-17,344) children under the age of five years old in Genesee County lived below poverty. Genesee County WIC served an average of 11,972 children between 2001 and 2003 (approximately 5.3% of WIC participants in the state). PedNSS data for the Genesee County WIC agency show:

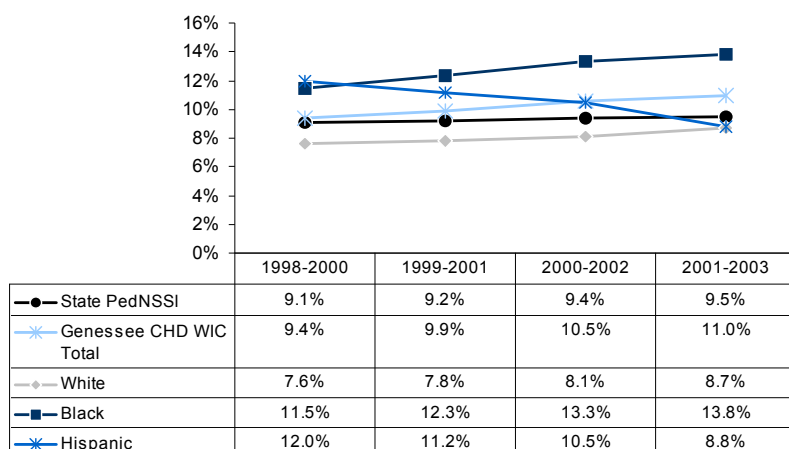
- The incidence of low birthweight was higher for Genesee County WIC infants than state or national PedNSS: 11.0% versus 9.5% and 9.0%.
- High birthweight, birthweight greater than 4000g or 13 lbs 8 oz, was observed in 12.6% of Hispanic infants and 9.0% of White participants.
- For Black participants in Genesee County WIC, children 2-5 years old have a lower prevalence of short stature than children under the age of 2 years.
- The prevalence of underweight was slightly higher among Black infants and children under five years old in Genesee County WIC compared to White and Hispanic infants and children.
- When stratified by race/ethnicity over 15% of all groups are at risk of overweight and 15.9% of Hispanic children two to five years old were overweight.
- One in five Black infants and children under five years old and infants and children under the age of two years old had iron deficiency anemia.
- Approximately 40% of White and Hispanic infants were ever breastfed.

Figure 1. **Racial/ethnic distribution** among infants and children under five years old, 2001-2003 PedNSS



Over 95% of infants and children under five years old in Genesee County WIC were either non-Hispanic White or non-Hispanic Black.

Figure 2. Trend in **low birthweight\*** by race/ethnicity among infants in the Genesee County HD WIC Agency, 1998-2003 MI PedNSS



\*Low birthweight is defined as having a birthweight less than 2500 grams (5lbs 9 oz) regardless of gestational age.

The trend in LBW increased for Black and White infants in Genesee County WIC between 1998 and 2003, but decreased for Hispanic infants during the same time frame.

The fluctuation in infants ever breastfed between 1998-2000 and 2001-2003 was driven mainly by fluctuation in the prevalence of White ever breastfed infants.

Figure 3. Trend in **ever breastfed** by race/ethnicity among infants in the Genesee County HD WIC Agency, 1998-2003 PedNSS

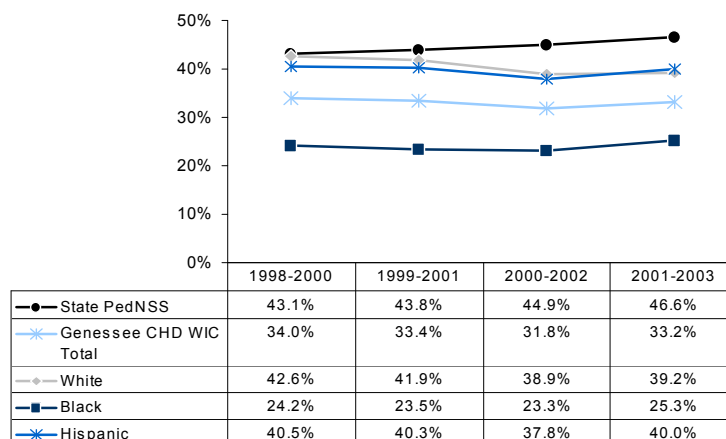
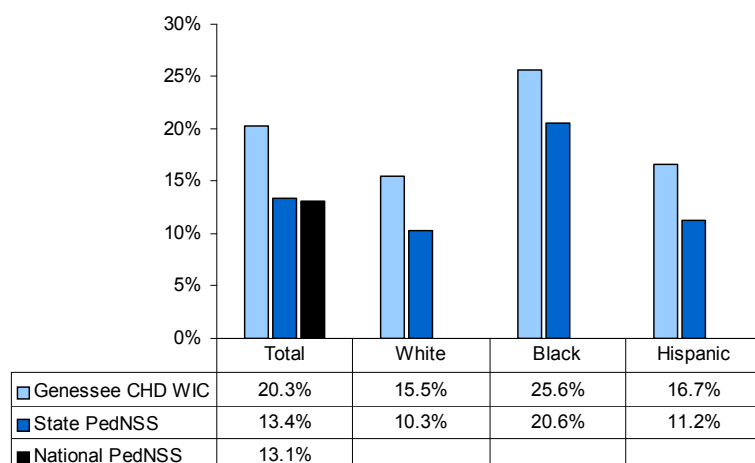


Figure 4. Average prevalence of **iron deficiency anemia\*** by race/ethnicity among infants and children under five years old, 2001-2003 PedNSS

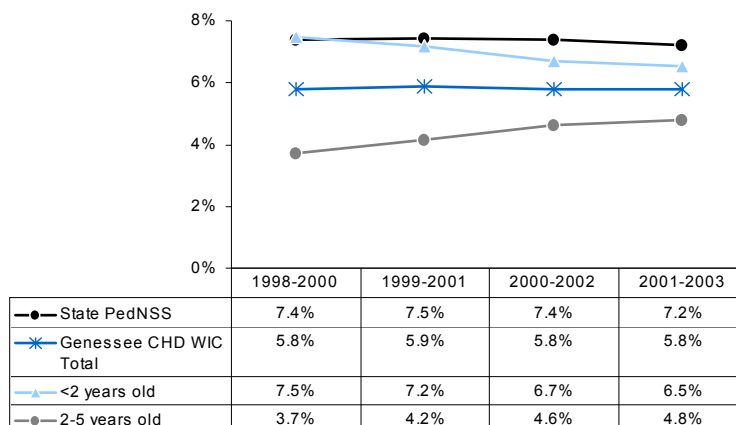


\*For infants under the age of one year, iron deficiency anemia is defined as having either a hemoglobin concentration of 11.0 g/dL or a hematocrit level of less than 33%. For children two to five years old, iron deficiency anemia is defined as having either a hemoglobin concentration less than 11.1 g/dL or a hematocrit level below 33.3%.

Compared to the state, the prevalence of iron deficiency anemia was higher among Genesee County WIC infants and children under five years old, particularly Black infants and children.

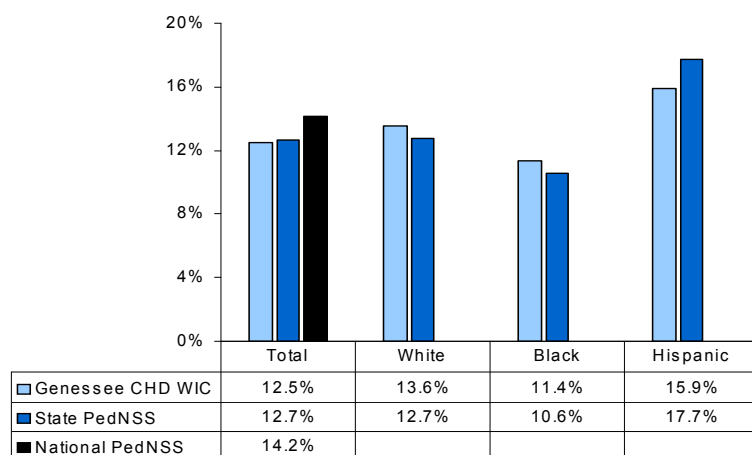
The decline in the trend of short stature among infants and children under two and the increase in short stature among children two to five years old, resulted in no change in the prevalence of Genesee County WIC since 1998.

Figure 5. Trend in **short stature\*** by age group among infants and children under five years old, 1998-2003 MI PedNSS



\*Short stature is defined as having a height-for-age below the 5th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

Figure 6. Average prevalence of **overweight\*** by race/ethnicity among children two to five years old, 2001-2003 PedNSS

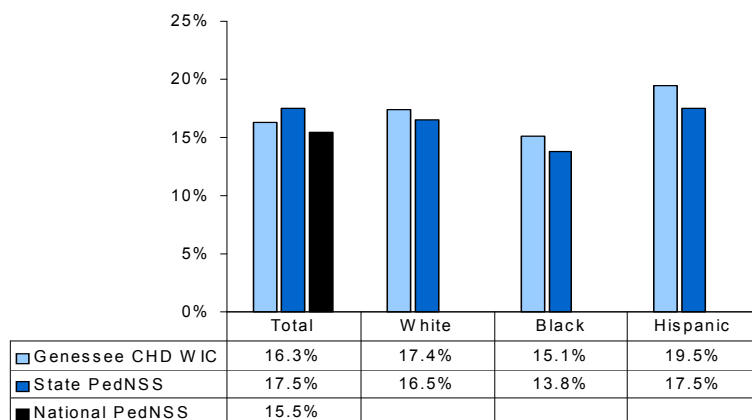


\*Overweight is defined as having a weight-for-height greater than the 95th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

The prevalence of overweight in Genesee was slightly above that of the state for White, Black, but not Hispanic children.

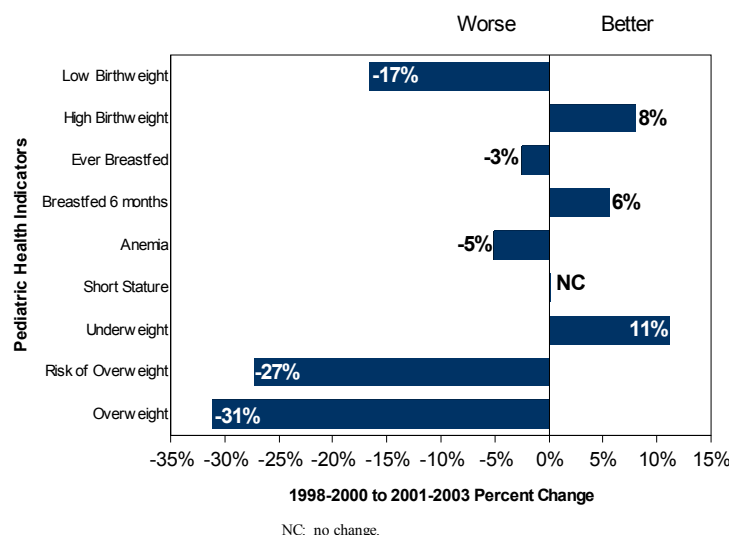
The risk of overweight was higher among White, Black, and Hispanic children two to five years old in Genesee County WIC compared to their state peers.

Figure 7. Average prevalence of **risk of overweight\*** by race/ethnicity among children two to five years old, 2001-2003 PedNSS



\*Risk of overweight is defined as having a weight-for-height between the 85th and the 95th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

Figure 8. Pediatric **health progress review** for Genesee County HD WIC infants and children under five years old, 1998-2000 and 2001-2003 MI PedNSS



Despite an increase in the incidence of low birthweight and the prevalence of overweight and risk of overweight, progress was made in the area of underweight, high birthweight, and breastfeeding to six months of age.



Jennifer M. Granholm, Governor

Janet Olszewski, Director

*Suggested Citation:*

Larrieux C, Eghtedary K, Grigorescu V, Carr A. "2003 WIC Local Agency PedNSS Report Genesee County Health Department." WIC Division, Bureau of Family, Maternal, and Child Health, Michigan Department of Community Health. April 2007.

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## Michigan Department of Community Health WIC Program

### Mission Statement

The mission of the Michigan WIC program is to improve the health outcomes and quality of life for eligible women, infants, and children by providing nutritious food, nutrition education, breastfeeding promotion, and support and referrals to health and other services. To this end:

- Delivery of services and supports are to be provided in a caring, respectful, efficient, and cost effective manner.
- Delivery of services shall be provided in a culturally competent and confidential manner.
- The WIC Program shall assure the broadest possible access to services, supports, and food.